PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/519030

CLAIMS AS FILED - PART I SMALL ENT									TITY		OTHER THAN	
			(Column 1)		(Column 2)		TYPE			OR	SMALL ENTITY	
U.S. NATIONAL STAGE FEES								RATE	FEE		RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LARGE ENT. = \$ 300		BAS	IC FEE		OR	BASIC FEE	300
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$ 50 / \$ 100		All other situations = \$ 100 / \$,200		EXA	M. FEE		1	EXAM. FEE	200
SEARCH FEE			ALL other	U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400		All other situations = \$ 250 / \$ 500		RCH FEE			SEARCH FEE	460
FEE FOR EXTRA SPEC. PGS.				minus 100 =		/ 50 =		\$ 125 =		1	X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			23	23 minus 20 = .		3		\$ 25 =		OR	X \$ 50 =	150
IND	EPENDENT CL	AIMS .	/	minus 3 =			X	\$ 100 =		ÖR	X \$ 200 =	1
MUI	TIPLE DEPEN	DENT CLAIM PR	RESENT			. 🗆	+ :	180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2						lumn 2	1	OTAL		OR	TOTAL	1052
	1	(Column 1)	AMEND	AMENDED - PART II (Column 2) (Column 3) HIGHEST			· [-	SMALL ENTITY			OTHER THAN: SMALL ENTIT	
AMENDMENT A		REMAINING AFTER	·	NUMB PREVIO	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	Total	*	Minus	PAID F	OK	=	×	\$ 25 =	,	OR	X \$ 50 =	FEE
	Independent	*	Minus	***		=		100 =		OR	X \$ 200 =	
	FIRST PRES	ENTATION OF I	MULTIPLE C	DEPENDENT C	LAIM		-	180 =		OR	+ \$ 360 =	
·							TOTA	L ADDIT.		OR	TOTAL ADDIT.	
								FEE		J OIL	FEE	
		(Column 1)		(Colum	n 2)	(Column 3)						
AMENDMENT B	-	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA	F	EATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X:	\$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=	X \$	100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+\$	180 =		OR	+ \$ 360 =		
			· · · · · · · · · · · · · · · · · · ·				TOTA	LADDIT.		OR	TOTAL ADDIT.	

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

FORM PTO-875 (Rev. 02/2005)